

## CHAPTER 4

### Overview of Division of Aging and Community Services (DACS)

#### PROGRAMS AND SERVICES

The Division of Aging and Community Services (DACS) is one of three senior services divisions in the Department of Health and Senior Services (DHSS) and is designated as the State Unit on Aging for the receipt of federal funds under the Older Americans Act as well as the State Administering Agency for two Medicaid 1915(c) waivers. The Division is responsible for preparing the State Strategic Plan on Aging, serving as the focal point for planning services for the aging, developing comprehensive information about New Jersey's elderly population and its needs, and maintaining information about services available to the elderly throughout the state.

DACS is comprised of seven offices: the Office of Administration and Finance; Office of Area Agency on Aging (AAA) Administration; Office of Community Choice Options; Office of Community Education and Wellness; Office of Community Programs; Office of the Ombudsman for the Institutionalized Elderly; and the Office of the Public Guardian and Elder Rights (see Exhibit 11).

#### **Aging and Disability Resource Connection (ADRC)**

New Jersey was one of the first 12 states to receive a federal grant from the Administration on Aging (AOA) and the Centers for Medicare and Medicaid Services (CMS) to help redesign the aging and disability service systems. While DHSS, through DACS, is the lead agency, the NJ Department of Human Services is collaborating with DHSS on this three-year initiative renamed in New Jersey as the Aging and Disability Resource Connection. In New Jersey, Atlantic and Warren Counties are serving as ADRC pilot counties.

#### **NJEASE (New Jersey Easy Access, Single Entry)**

New Jersey's aging services delivery system is known as NJEASE (New Jersey Easy Access, Single Entry). By dialing a single, toll-free telephone number callers are connected to their Area Agency on Aging (AAA) for information and assistance. That number is 1-877-222-3737.

#### OFFICE OF ADMINISTRATION AND FINANCE

This office oversees and provides administrative and fiscal support to the operational units of DACS including the 2002 consolidation of two divisions into a single division responsible for all home and community based services.

#### OFFICE OF AREA AGENCY ON AGING (AAA) ADMINISTRATION

The Office of AAA Administration is responsible for the oversight of the statewide network of comprehensive community based services provided by the county Area Agencies on Aging (AAAs) through Area Plan Contracts. These services include: information and access services; legal assistance; in-home services; care management; health and wellness programs; congregate and home-delivered nutrition services; and adult protective services.

*No. of beneficiaries served annually: 496,968 in CY2004.*

### **Senior Nutrition Program**

Through more than 200 nutrition centers, New Jersey elders 60 years and older receive at least one nutritious meal, five or more days per week in a group or congregate setting. Title III Home Delivered Meals (HDM) are available to homebound persons who are eligible for service based on need due to frailty, disability, illness or isolation. There is no means test for nutrition services. Each meal meets the nutritional standard of one-third of the Recommended Daily Allowance, and complies with the Dietary Guidelines for Americans.

The home delivered meal program has been expanded through state funds to meet the growing number of homebound elderly. In 1987, casino revenue funds were allocated to provide weekend and holiday HDM. In 2000, state general funds were allocated to provide supplemental funds to reduce the HDM waiting list of eligible older adults.

The division is working with partners throughout the state to begin implementing changes under its Mission Nutrition initiative. These changes are addressing the state's ethnic and cultural diversity through food and programming, expanding the programs to include health and wellness activities, and building flexibility into food choices and times of operation.

*No. of beneficiaries served annually: 2.1 million meals served to 30,740 individuals in a congregate setting in CY2004; 3.7 million home-delivered meals to 29,177 individuals in CY2004.*

### **OFFICE OF COMMUNITY CHOICE OPTIONS**

The Office of Community Choice Options implements nursing facility level regulations, policies and procedures to ensure that Medicaid beneficiaries in need of long-term care receive quality services and appropriate service delivery in the least restrictive care setting. There are currently eight regional Long Term Care Field Offices.

#### **Pre-Admission Screening (PAS)**

The Pre-Admission Screening (PAS) program is a care needs assessment process available to persons applying for Medicaid reimbursed long-term care in either nursing facilities or home and community-based alternatives. PAS helps applicants and families choose between various long-term care programs, and assists them in securing the selected service delivery placement. PAS was implemented in 1989.

*No. of beneficiaries served annually: During CY2004, Community Choice counselors completed a total of 33,746 PAS assessments (26,686 initial assessments and 7,060 reassessments) for nursing facility or waiver program placement. This represents a 10% increase in PAS completions from 2003 to 2004. Timeliness in completing PAS assessments improved from 55% to 95% during 2004.*

### **Community Choice Program**

The Community Choice Program, established in 1998, is designed to select short-term Medicaid nursing facility residents, provide them with choices on community-based alternatives, and coordinate their discharge. This program encourages those individuals capable of living in the community to do so. Consumers are identified, encouraged to consider alternate housing with the necessary support services, and assisted as they make the transition from a nursing facility to community settings.

*In CY2003, Community Choice counselors facilitated the discharge of 206 individuals from Nursing Facilities (NF). In CY2004, it completed 258, or a 20% increase from 2003 to 2004.*

### **Case Management**

The office has provided Medicaid-eligible waiver clients with assessment and care monitoring since 1996. This service enables participants to remain in the least restrictive environment possible. A client-directed approach is utilized in the development and completion of a plan of care.

### **Nursing Facilities Transition Grant Initiative**

This three-year, federally funded grant, awarded in 2002 and began in 2004, is designed to improve supports for non-senior disabled individuals to allow them to remain in, or transition from the nursing home to, home and community-based services.

### **Adult Day Health Services**

Adult Day Health Services is a program which provides medically necessary services in an ambulatory care setting to persons who are non-residents of the facility and who, due to their physical or mental impairment, require services to support community living. Individuals who request Adult Day Health Services must meet financial and medical requirements for Medicaid coverage. Facilities must be licensed by the department and are required to provide medical, nursing, social, personal care and rehabilitative services, a midday meal, activities and transportation to and from the facility. This program was established in 1977.

*No. of beneficiaries served annually: 12,839 individuals in FY2004.*

## **OFFICE OF COMMUNITY EDUCATION AND WELLNESS**

The Office of Community Education and Wellness informs and educates consumers and professionals about programs and services for older adults, helping them to make informed decisions for successful aging. There are four program units: Information, Assistance and Community Outreach; Older Adult Health and Wellness; Training and Education; and the State Health Insurance Assistance Program (SHIP).

### **Information, Assistance and Community Outreach**

This unit is responsible for providing information on and promoting the use of state and federal programs for senior citizens and caregivers via the department's website, one-on-

one toll-free telephone counseling, and through the development of promotional and educational materials. This core service has been provided since 1973.

*No. of beneficiaries served annually: 167,951 individuals in CY2003.*

### **Aging Network Professional Training**

This unit is responsible for developing and delivering training programs for professionals working for the Division of Aging and Community Services, the County Area Agencies on Aging (AAAs), and other providers of senior services operating in the State of New Jersey. Major trainings include the four-day Basic Information and Assistance Training for those persons who are the first point of contact for consumers seeking help; the eight-day Core Care Management Training for community-based outreach workers and care managers; a one-day continuing education workshops for DACS and AAA staff and local service provider staff including Congregate Housing, the Public Guardian, the Ombudsman, Community Choice, Long Term Care Field Offices, Adult Day Health Services, Adult Protective Services and those working with people with disabilities; and training modules for the ADRC initiative.

### **Older Adult Health and Wellness**

This unit fosters the well-being of older adults and their caregivers through coordinated strategies aimed at health promotion, provider and consumer education and the prevention, early detection and prompt management of disease. Primary areas of concentration includes osteoporosis, arthritis, falls prevention, nutrition, mental health and medication management.

### **HealthEASE**

The division received a \$300,000 grant from the Robert Wood Johnson Foundation's Health Initiatives project in 2002 to develop pilot programs promoting longer and healthier lives for seniors. The grant is funding the expansion of the department's existing *NJEASE* system to create *HealthEASE* pilots in Ocean and Bergen Counties.

### **Arthritis - Quality of Life Initiative**

In compliance with the provisions of a 1999 statute, the unit provides staff support to the Arthritis Advisory Council, its subcommittees, and to two regional arthritis centers. The centers are working to increase awareness about arthritis and the importance of early diagnosis and treatment and to deliver evidence-based programs aimed at prevention of complications and increased quality of life. The activities of the centers include information and outreach; physical activity classes; and self-management programs and services for persons affected by arthritis.

### **Osteoporosis – Project Healthy Bones**

A 1997 law established the New Jersey Interagency Council on Osteoporosis (IOC) and mandated prevention and education services be established in the DHSS. This DACS unit provides leadership to the IOC and implements initiatives in the areas of public and professional education and outreach.

Project Healthy Bones is a peer-led program that engages older adults with or at-risk for osteoporosis in weight bearing exercise and provides education on nutrition, falls prevention and other related topics. The 24-week program is delivered at community sites throughout the state. In 2005, a new system of program delivery is being implemented via partnership with the state's two regional arthritis centers and the Saint Barnabas Osteoporosis Center and Wellness Center.

### **Chronic Disease Self Management**

Through a grant from the Association of State and Territorial Chronic Disease Program Directors, the department is partnering with the Geriatric Education Center at the University of Medicine and Dentistry of New Jersey, School of Osteopathic Medicine, to establish the infrastructure for Chronic Disease Self Management in Camden County. The initiative focuses on two target older adult populations: Asian Indians and African Americans.

Through this initiative, leaders from each organization are trained as Chronic Disease Self Management class leaders. Following the delivery of four classes with the support of the GEC and DHSS, the leaders will have the capacity to deliver the classes independently. This initiative is being fully evaluated with an emphasis on the delivery of evidence-based programs in target populations.

### **State Health Insurance Assistance Program (SHIP)**

SHIP trains volunteers in 21 counties to assist Medicare enrollees who have problems or questions about their health insurance. The program develops informational packages about Medicare, Medicare supplemental insurance and Medicare contracting HMOs for distribution to Medicare enrollees and their families.

*No. of beneficiaries served annually: 30,300 phone calls and 13,800 in-person contacts in CY2003.*

The program was awarded a supplemental grant of \$274,219 from CMS for increased counseling and assistance on long-term care planning, including insurance options and other financial and service approaches. All SHIP counselors (355) received training in basic long-term care information. Seventy-four counselors completed an intensive training program to be certified as Long-Term Care Specialists. A January to May 2005 long-term care awareness campaign (called *Own Your Own Future*) funded by the federal government further enhances the SHIP grant and puts the concept of the need to plan for long-term care in the spotlight.

Through this campaign, letters from Acting Governor Richard J. Codey encouraging individuals to plan for their long-term care needs, were sent to 821,797 residents aged 50-70. Nearly 10% of those receiving the letter requested the national toolkit. DHSS produced, printed, and is currently distributing *A Guide to Community-Based Long Term Care in New Jersey* to those respondents who requested NJ-specific resource information. More than 15,000 guides have been distributed statewide since mid-May 2005.

## **OFFICE OF COMMUNITY PROGRAMS**

This office establishes policy, and provides support, technical assistance and training to the AAAs, county field staff, community service providers, and other organizations administering programs concerned with the well-being of older citizens. In addition, this office conducts quality assurance measures, monitoring procedures, and data analysis to ensure stable and high quality home and community-based programs for New Jersey's seniors and their caregivers. This office has administrative responsibilities for Medicaid waiver programs and state funded home and community programs for older adults.

### **MEDICAID WAIVER PROGRAMS**

#### **Community Care Program for the Elderly and Disabled (CCPED)**

This Medicaid waiver program, established in 1983, encourages individuals to obtain home-based supportive care as opposed to receiving long-term care services in a nursing facility or hospital setting. Eight services are available under CCPED: case management, home health, homemaker, medical day care, non-emergency medical transportation, respite care, social day care and prescription drugs. While there is no co-pay for CCPED services there is a cost cap on each individual's service package. The program assists persons age 65 and older and younger persons with disabilities. Eligibility includes income and asset tests.

*No. of beneficiaries served annually: 5,020 individuals in CY2004.*

#### **Assisted Living/Adult Family Care (AL/AFC)**

Under this Medicaid waiver program, approved in 1996, services are targeted to individuals who reside in licensed, Medicaid-approved Assisted Living (AL) or Adult Family Care (AFC) settings. Assisted Living promotes a resident's self-direction and provides assistance with personal care, medication management, and everyday activities in one of three settings: Assisted Living Residences, Comprehensive Personal Care Homes, and Assisted Living Programs in Subsidized Housing. All AL/AFC programs have consumer co-pays, except the Assisted Living Program in Subsidized Housing. In 2004, 750 new slots were funded for AL/AFC, bringing total slots to 3,200.

*No. of assisted living beneficiaries served annually: 3,767 individuals in CY2004.*

Adult Family Care is a service provided under contractual agreement whereby no more than three persons receive room and board, personal care and health services in the home of an unrelated individual. The caregiver is screened, trained and approved by an AFC sponsor agency, licensed by the DHSS.

*No. of beneficiaries served annually: 55 individuals in CY2004.*

#### **Caregivers Assistance Program (CAP)**

Fourteen waiver services, plus full Medicaid State Plan services, are targeted to individuals who reside in a home or an apartment, and not a licensed facility. The Caregivers Assistance Program (CAP), created in 1999, is designed to supplement the assistance an

individual receives from his or her natural support network of family, friends, and neighbors, as well as from community agencies and volunteer groups. CAP recognizes that natural support networks accomplish most caregiving to vulnerable individuals. While services can be provided by traditional waiver service providers, they can also be supplied by qualified providers employed by the client. There is no co-pay in CAP, but income and asset limits must not be exceeded.

*No of beneficiaries served annually: 1,977 individuals in CY2004.*

### **Programs of All-Inclusive Care for the Elderly (PACE)**

New Jersey was selected by the National PACE Association to receive technical assistance to analyze potential markets for developing Programs of All-Inclusive Care for the Elderly (PACE). PACE is a Medicare and Medicaid comprehensive managed care program, covering health and social services for frail individuals age 55 and older wishing to remain in the community. In addition to funding feasibility studies to determine the best locations for PACE, this award provided education for state staff and outreach to communities and potential providers. The division is developing Medicaid rates, solicitation strategies, licensing requirements and program policies to establish PACE in New Jersey.

## **STATE-FUNDED COMMUNITY BASED PROGRAMS**

### **New Jersey Caring for Caregivers Initiative**

The purpose of this initiative, launched in 2005, is to enhance and prolong the ability of unpaid caregivers to continue to provide care for an elderly or adult disabled individual. The initiative has two components. The first, *Caregiver At Home*, will provide mental health counseling, professional in-home training and education, and trained volunteer supportive assistance through funding allocated to each of New Jersey's 21 AAAs. There are no income or asset tests for this component. The second, a *Caregiver-Directed Respite Pilot*, will be initiated in four counties to test a program of direct payments to caregivers to reimburse expenditures for providing care to a senior or younger adult with disabilities. Reimbursable items are clearly defined and must be identified on a service plan agreement developed by the caregiver and the local coordinator of the Statewide Respite Care Program. Up to \$250 per month can be given to a caregiver for reimbursable items.

### **Jersey Assistance for Community Caregiving (JACC)**

This program, created in 1999, provides thirteen in-home services and supports that enable an individual at risk of placement in a nursing home to remain in his or her community home. By providing a uniquely designed package of supports for the individual, JACC is intended to supplement and strengthen the capacity of caregivers, as well as to delay or prevent placement in a nursing home. The JACC service package mirrors that of the CAP program, making for an easy transition for JACC consumers who spend down to Medicaid eligibility.

*No. of beneficiaries served annually: 1,742 individuals in CY2004.*

### **Home Care Expansion Program (HCEP)**

With the creation of other state-funded home and community based services, this program, established in 1989, stopped enrolling participants in 1996. Today, nine individuals continue to receive services under HCEP.

### **Adult Day Services Program for Persons with Alzheimer's Disease or Related Disorders**

This program, created in 1987, provides relief and support to family caregivers of persons with Alzheimer's disease or a related disorder through provision of subsidized adult day care services. Clients are provided up to three days of service per week, depending on their need and the availability of funds. Priority is given to those persons in the moderate to severe ranges of dementia. Participants pay a cost-share, based upon a sliding scale.

*No. of beneficiaries served annually: 785 individuals in FY2004.*

### **Congregate Housing Services Program**

The program, established in 1981, provides meals, housekeeping, personal care and coordination of services in affordable housing settings. It is designed to incorporate shelter and services needed by the functionally impaired and socially deprived elderly to enable them to maintain or to return to a semi-independent lifestyle. The program has 38 providers serving 70 buildings in 18 counties. Beneficiaries pay a cost-share, based upon a sliding scale.

*No. of beneficiaries served annually: 2,817 individuals in CY2004.*

### **Statewide Respite Care Program (SRCP)**

SRCP provides respite care services for elderly and functionally impaired younger adults to relieve their unpaid caregivers of the stress arising from the responsibility of providing daily care. The program also helps families avoid making nursing home placement of their loved ones. Services are available for emergency and crisis situations, as well as for routine respite care. Participants pay a cost-share, based upon a sliding scale. Services provided under SRCP include companions, homemaker/home health aides, medical or social adult day services, temporary care in licensed health care facilities, camperships, and private duty nursing services. The program was created in 1988 and participants must meet income and asset guidelines.

*No. of beneficiaries served annually: 3,964 families in CY2004.*

## **OFFICE OF THE OMBUDSMAN FOR THE INSTITUTIONALIZED ELDERLY (OOIE)**

By statute, the OOIE is responsible for investigating, and resolving or referring complaints filed by any source, including anonymous sources, regarding abuse, neglect and exploitation of residents of long-term care facilities in the state, and for promoting, advocating and insuring the quality of care received, and the quality of life experienced, by elderly residents of such facilities. Identities of all complainants are maintained as confidential information. The office is state



funded, and also receives Federal Title VII Older Americans Act funds, which support the office's Volunteer Advocate Program.

*No. of beneficiaries served annually: 3,431 cases representing about 7,034 complaints investigated and resolved in FY2004.*

## **OFFICE OF THE PUBLIC GUARDIAN AND ELDER RIGHTS**

This office administers guardianship services, Adult Protective Services, the Title III Legal Assistance Program, and Elder Rights.

### **The Public Guardian for Elderly Adults**

The Public Guardian serves as the guardian or conservator of last resort for those individuals aged 60 and older who have no willing or responsible family member or friend to act in that capacity. The Public Guardian accepts cases as assigned by Judges of the Superior Court of New Jersey.

*No. of beneficiaries served annually: 664 clients in CY2004.*

### **Adult Protective Services (APS)**

APS helps vulnerable adults who are being subjected to abuse, neglect or exploitation and lack sufficient understanding or capacity to make, communicate or carry out decisions concerning their well-being. APS serves adults who live in the community in their own homes, apartments, or with others and suffer from a physical or mental illness or disability.

*No. of beneficiaries served annually: 7,450 referrals resulting in 4,321 investigations in CY2003.*

### **Money Management Program**

The office administers this bill paying service program developed by AARP as a way to provide older persons and people with disabilities help with processing routine bills, writing checks, developing budgets, managing financial matters and reconciling bank accounts. The goal is to provide guidance and non-intrusive bill paying assistance to maximize client independence with minimal intervention. The service is currently available in seven counties.

### **Vulnerable Elder Rights Protection – Title VII**

Title VII responsibilities, as stipulated in the Older Americans Act, are dispersed among several offices within the division. In New Jersey, Adult Protective Services is a state funded program, administered through the 21 AAA Area Plan Contracts and provided by local community agencies. Title VII funds are used for public education, outreach, and training for APS workers and supervisors.

### **Legal Assistance**

As mandated by the Older Americans Act, AAAs must fund legal advice, assistance, and representation provided by, or under the supervision of, a lawyer to protect and secure the rights of older persons. The division's legal assistance coordinator, in consultation with AAAs, is responsible for identifying and prioritizing statewide activities that will ensure older adults have access to and assistance in securing and maintaining benefits and rights.

# Division of Aging and Community Services

## An Overview

EXHIBIT 11

